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7590

06/09/2004

John L. Rogitz  
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San Diego, CA 92101



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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

|                    |
|--------------------|
| (Depositor's name) |
| (Signature)        |
| (Date)             |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 09/870,206      | 05/29/2001  | Kevin A. Stoodley    | CA920000079US1      | 7826             |

TITLE OF INVENTION: COMPILER GENERATION OF INSTRUCTION SEQUENCES FOR UNRESOLVED STORAGE REFERENCES

| APPLN. TYPE    | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE   |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | NO           | \$1330    | \$300           | \$1630           | 09/09/2004 |

| EXAMINER        | ART UNIT | CLASS-SUBCLASS |
|-----------------|----------|----------------|
| INGBERG, TODD D | 2124     | 717-153000     |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☒ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 John L. Rogitz

2

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

International Business Machines Corporation

Armonk, New York

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee

☒ Publication Fee

☐ Advance Order - # of Copies \_\_\_\_\_

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☐ A check in the amount of the fee(s) is enclosed.

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☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 09-0460 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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TRANSMIT THIS FORM WITH FEE(S)



COMMISSIONER FOR PATENTS  
ALEXANDRIA, VA 22313

Docket No. CA920000079US1  
(PATENT)

SIR:

Transmitted herewith for filing in the Application of: STOODLEY Serial No.: 09/870,206

Title: **COMPILER GENERATION OF INSTRUCTION SEQUENCES FOR UNRESOLVED STORAGE REFERENCES**

are the following:

- ☐ sheets of formal drawings
- ☐ Amendment
- ☐ Amendment after Final Rejection
- ☐ Response to Restriction Requirement
- ☐ Letter to Drawing Review Branch
- ☐ Certificate of Correction
- ☐ Other -
- ☐ NO ADDITIONAL FEE IS REQUIRED

- ☐ Basic Filing Fee(\$740.00)
- ☐ Information Disclosure Statement
- ☐ Declaration and Power of Attorney
- ☐ Assignment of the Invention(\$40.00)
- ☐ Recordation Form Cover Sheet
- ☐ Notice to File Missing Parts(\$130.00)
- ☐ Petition for Extension of Time(\$110.00)
- ☒ Issue Fee(\$1,330.00)
- ☒ Publication Fee(\$300.00)
- ☐ Appeal Brief(\$320.00)

| OTHER THAN<br>A SMALL ENTITY      | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | HIGHEST NO.<br>PREVIOUSLY<br>PAID FOR | EXTRA | RATE   | ADDITIONAL<br>FEE |
|-----------------------------------|---|---------------------------------------|-------|--------|-------------------|
| SUBTOTAL FROM ABOVE               |   |                                       |       |        | \$1630.00         |
| ADDITIONAL CLAIMS                 |   |                                       |       | x 18 = |                   |
| INDEPENDENT CLAIMS                |   |                                       |       | x 80 = |                   |
| MULTIPLE DEP. CLAIMS<br>PRESENTED |   |                                       |       | +260 = |                   |
| <u>TOTAL</u>                      |   |                                       |       |        | \$1630.00         |

☒ Please charge my Deposit Account No. 09-0460 in the amount of \$1630.00. A duplicate copy of this sheet is attached.

☒ The Commissioner is hereby authorized to charge payment for any additional filing fees required under 37 CFR 1.16 or or any patent application processing fees under 37 CFR 1.17 in association with this communication or credit any overpayment to Deposit 09-0460.

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Person mailing paper/fee: \_\_\_\_\_

Signature \_\_\_\_\_

Respectfully submitted,  
Kevin A. Stoodley

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